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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875				Application or Docket Number 0919541690
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CLAIMS AS FILED – PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	28	minus 20 = 8
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 = 0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

OR

RATE	Fee
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

**OTHER THAN
SMALL ENTITY**

OR

RATE	Fee
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

CLAIMS AS AMENDED – PART II

12.31.03		(Column 1) (Column 2) (Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 29	Minus ** 28 =
Independent (37 CFR 1.16(b))	* 3	Minus *** 3 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

OR

RATE	ADDI- TIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

**OTHER THAN
SMALL ENTITY**

OR

RATE	ADDI- TIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

10.22.04		(Column 1) (Column 2) (Column 3)	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 29	Minus ** 28 =
Independent (37 CFR 1.16(b))	* 3	Minus *** 3 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

RATE	ADDI- TIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

28.05		(Column 1) (Column 2) (Column 3)	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 29	Minus ** 28 =
Independent (37 CFR 1.16(b))	* 3	Minus *** 3 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI- TIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

RATE	ADDI- TIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

09/954690

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

AVEXP204US

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	28	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	28 minus 20 =	8
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		(Column 2) (Column 3)	
			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	28	Minus	28	=
Independent	3	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

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AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		(Column 2) (Column 3)	
			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	24	Minus	28	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		(Column 2) (Column 3)	
			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	24	Minus	28	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	Fee	RATE	Fee
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	144
X40=		OR X80=	
+135=		OR +270=	
TOTAL		OR TOTAL	854

SMALL ENTITY
OTHER THAN
OR SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	